## PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998

Application or Docket Number

| (Column 1) (Column 2)                                                                                                                                                                                                                                                                                               |                |                                           |              |                                             |                  | TYPE                | TYPE OR SMALL ENTITY   |    |                     |                        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------------------------------|--------------|---------------------------------------------|------------------|---------------------|------------------------|----|---------------------|------------------------|
| FOR                                                                                                                                                                                                                                                                                                                 |                | NUME                                      | BER FILED    | NUMBER                                      | EXTRA            | RATE                | FEE                    |    | RATE                | FEE                    |
| BASIC FEE                                                                                                                                                                                                                                                                                                           |                |                                           |              |                                             |                  |                     | 380.00                 | OR |                     | 760.00                 |
| TOTAL CLAIMS                                                                                                                                                                                                                                                                                                        |                | ن ا                                       | 3; minus     | 20= * //                                    |                  | X\$ 9=              |                        | OR | X\$18=              | 198 -                  |
| IND                                                                                                                                                                                                                                                                                                                 | EPENDENT CL    | AIMS -                                    | minus        | 3 = * /                                     | •                | X39=                | ٠                      | OR | X78=                | 78 -                   |
| MULTIPLE DEPENDENT CLAIM PRESENT                                                                                                                                                                                                                                                                                    |                |                                           |              |                                             |                  |                     |                        | OR | +260=               | _                      |
| • 11                                                                                                                                                                                                                                                                                                                | the difference | TOTAL                                     |              | OR                                          | TOTAL            | 1936 -              |                        |    |                     |                        |
| CLAIMS AS AMENDED - PART II                                                                                                                                                                                                                                                                                         |                |                                           |              |                                             |                  |                     |                        |    | OTHER               |                        |
| (Column 1) (Column 2) (Column 3)                                                                                                                                                                                                                                                                                    |                |                                           |              |                                             |                  | SMALL               | ENTITY                 | OR | SMALL               | ENTITY                 |
| AMENDMENT A                                                                                                                                                                                                                                                                                                         |                | CLAIMS REMAINING AFTER AMENDMENT          |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                                                                                                                                                     | Total          | . 3                                       | Minus        | -120                                        | = []             | - X\$ 9=            |                        | OR | X\$18=              |                        |
|                                                                                                                                                                                                                                                                                                                     | Independent    | · 4                                       | Minus        | -5                                          | = /              | X39=                |                        | OR | X78=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                                                                                                                                                                                                                                                      |                |                                           |              |                                             |                  | +130=               |                        | OR | +260= .             |                        |
|                                                                                                                                                                                                                                                                                                                     |                |                                           |              |                                             |                  | TOTAL<br>ADDIT, FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |
| 4700 (Column 1) (Column 2) (Column 3)                                                                                                                                                                                                                                                                               |                |                                           |              |                                             |                  |                     |                        |    |                     |                        |
| AMENDMENT B                                                                                                                                                                                                                                                                                                         |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                                                                                                                                                     | Total          | . 23                                      | Minus        | 3/                                          | -                | X\$ 9=              |                        | OR | X\$18=              |                        |
| AME                                                                                                                                                                                                                                                                                                                 | Independent    | • 2                                       | Minus        | *** 4                                       | - 0              | X39=                |                        | OR | X78=                |                        |
| _                                                                                                                                                                                                                                                                                                                   | FIRST PRESE    | NTATION OF I                              | NULTIPLE DEI | PENDENT CLAIM                               |                  | +130=               |                        | OR | +260=               |                        |
|                                                                                                                                                                                                                                                                                                                     | •              |                                           |              |                                             |                  | TOTAL               |                        | OR | TOTAL               |                        |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE  (Column 1) (Column 2) (Column 3)                                                                                                                                                                                                                                                  |                |                                           |              |                                             |                  |                     |                        |    |                     |                        |
| AMENDMENT C                                                                                                                                                                                                                                                                                                         |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                                                                                                                                                     | Total          | *                                         | Minus        | **                                          | =                | X\$ 9=              |                        | OR | X\$18=              |                        |
| AME                                                                                                                                                                                                                                                                                                                 | Independent    | *                                         | Minus        | state.                                      | =                | X39=                | ,                      | OR | X78≃                |                        |
| _                                                                                                                                                                                                                                                                                                                   | FIRST PRESE    | NTATION OF I                              | MULTIPLE DEF | PENDENT CLAIM                               |                  | .120-               | •                      |    | +260=               | <u></u>                |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.                                                                                                                                                                                                                               |                |                                           |              |                                             |                  |                     |                        | OR | TOTAL               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                |                                           |              |                                             |                  |                     |                        |    |                     |                        |